



LEE COUNTY SHERIFF'S OFFICE
P.O. Box 688 1900 Frederick Road Opelika, AL 36803-0688
334-749-5651

APPLICATION FOR EMPLOYMENT

Please Read Carefully:

Conditions of employment are stated at the end of this form. Please read carefully before you sign this application.

You are not required to answer any question(s) you feel may violate federal, state and/or local law or which you feel is not related to the position for which you are applying. However, the applicable areas of the application must be completed in full, *even if attaching a resume*. Please include all of your most recent employers, even if you only worked for them for a short period of time.

We consider applicants for all positions without regard to age, sex, religion, race, color, national origin, creed, marital status, political affiliation or disability.

WE ARE AN EQUAL OPPORTUNITY EMPLOYER

(PLEASE TYPE OR PRINT)

TODAY'S DATE: _____		AVAILABLE START DATE: _____			POSITION DESIRED: _____			
HOURS OF AVAILABILITY:	Day	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
	AM							
	PM							
Applying for:		Full time <input type="checkbox"/>		Part time <input type="checkbox"/>		Temporary <input type="checkbox"/>		

Have you ever filed an application with Lee County before? Yes No If yes, give position & date _____

FOR SWORN LAW ENFORCEMENT POSITIONS:

Are you at least 21 years of age? YES NO

Are you currently Post Certified? YES NO

Would you be able to provide a copy of the following documents upon hire for future entry into the Police Academy:

- Birth Certificate High School Diploma or State Equivalency Certificate Valid Driver's License
- Social Security Card DD214 for military (if applicable)

GENERAL INFORMATION

Name _____
Last First Middle

Current Address _____
Street Apt #

City/State _____ Zip _____

Former Address _____
Street Apt #

City/State _____ Zip _____

Home Telephone _____ Alternate Telephone _____

Best time to contact you at home is _____ : _____ AM PM Email Address: _____

Social Security Number _____ - _____ - _____ Desired Salary Range \$ _____

Please read carefully:

EMPLOYMENT HISTORY: Your application *may not* be considered unless every question in this section is answered. **Please provide the correct telephone numbers of past employers.** You may include volunteer work and/or military experience.

MOST RECENT EMPLOYER		Full time <input type="checkbox"/> Part time <input type="checkbox"/> Temporary <input type="checkbox"/>		Are you still working? YES <input type="checkbox"/> NO <input type="checkbox"/> If YES, may we contact? YES <input type="checkbox"/> NO <input type="checkbox"/>
COMPANY NAME:	SALARY: \$ _____ per _____	DATES EMPLOYED: (Month and Year)		
ADDRESS:	JOB TITLE:	FROM :	TO:	
TELEPHONE:	SUPERVISOR:	REASON FOR LEAVING:		
DUTIES & RESPONSIBILITIES: _____				

SECOND MOST RECENT EMPLOYER		Full time <input type="checkbox"/> Part time <input type="checkbox"/> Temporary <input type="checkbox"/>		Are you still working? YES <input type="checkbox"/> NO <input type="checkbox"/> If YES, may we contact? YES <input type="checkbox"/> NO <input type="checkbox"/>
COMPANY NAME:	SALARY: \$ _____ per _____	DATES EMPLOYED: (Month and Year)		
ADDRESS:	JOB TITLE:	FROM :	TO:	
TELEPHONE:	SUPERVISOR:	REASON FOR LEAVING:		
DUTIES & RESPONSIBILITIES: _____				

THIRD MOST RECENT EMPLOYER		Full time <input type="checkbox"/> Part time <input type="checkbox"/> Temporary <input type="checkbox"/>		Are you still working? YES <input type="checkbox"/> NO <input type="checkbox"/> If YES, may we contact? YES <input type="checkbox"/> NO <input type="checkbox"/>
COMPANY NAME:	SALARY: \$ _____ per _____	DATES EMPLOYED: (Month and Year)		
ADDRESS:	JOB TITLE:	FROM :	TO:	
TELEPHONE:	SUPERVISOR:	REASON FOR LEAVING:		
DUTIES & RESPONSIBILITIES: _____				

MILITARY EXPERIENCE				
BRANCH OF MILITARY:	SUPERVISOR:	DATES EMPLOYED: (Month and Year)		JOB TITLE/RANK:
ADDRESS:	TELEPHONE:	FROM :	TO:	
DUTIES & RESPONSIBILITIES: _____				

REFERENCES: Include only individuals familiar with work ability. Do not include family members.

_____	()	_____	_____	_____
Name	Address/Telephone	Years known	Relationship	
_____	()	_____	_____	_____
Name	Address/Telephone	Years known	Relationship	
_____	()	_____	_____	_____
Name	Address/Telephone	Years known	Relationship	

Are you prevented from lawfully becoming employed in this country because of Visa or Immigration Status? YES NO
(Proof of identity and eligibility will be required upon employment)

How Did You Hear About Us?

Advertisement Employment Agency Inquiry Current Employee _____ Other _____

Have you ever been employed with the County before? YES NO If YES, what department? _____

From: _____ To: _____ Job Title _____ Reason for Leaving _____

Do you have any relatives employed with this company? YES NO

If YES, list names, positions: _____

Have you ever been convicted of a felony? YES NO

If YES, please list when, where, nature of the charge: _____

(A conviction record will not necessarily disqualify applicant)

If you are under 18 years of age, can you provide required proof of your eligibility to work? YES NO

Are you currently on 'lay off' status and subject to recall? YES NO

Can you travel if job requires it? YES NO

EDUCATION:

Circle highest grade completed: 1 2 3 4 5 6 7 8 9 10 11 12

If applicable, college level completed: 1 2 3 4 5+ Graduate/Professional 1 2 3 4 5+

Degree(s), License(s), Certification(s) held: _____ Course of Study: _____

Name of last school attended: _____

Other training or trade schools: _____

TRAINING AND SKILLS:

Computer Software you can Operate: _____

Which Languages other than English do you speak fluently? _____

Please list any other job-related training or skills you possess: _____

Equipment you can operate: Typewriter (WPM) _____ Adding Machine/Calculator Multi-line telephone

Cash Register Commercial Equipment 1. _____ 2. _____

DO NOT ANSWER THE FOLLOWING QUESTION UNLESS YOU HAVE BEEN INFORMED OF THE REQUIREMENTS OF THE JOB FOR WHICH YOU ARE APPLYING: Are you capable of performing in a reasonable manner, with or without reasonable accommodation, the activities involved in the job or occupation for which you are applying for? YES NO

Answer the following questions ONLY if the position sought requires the operation of a motor vehicle/heavy equipment:

Do you have a valid Driver's License? YES NO Commercial Driver's License? YES NO

Any moving violations in past 3 yrs? YES NO

If YES, please describe: _____

COMMENTS: Use this space for any additional information you wish to share that may assist us in reviewing your qualifications.

(You may include any professional, trade, business, or civic activities and offices held; additional qualifications acquired from other experience; any job-related training received in the US military; etc.)

IMPORTANT INFORMATION TO APPLICANT

Federal law prohibits the *Lee County Sheriff's Office* from hiring any person unless he/she presents documents which establish identity and eligibility to work in the United States. Therefore, the *Lee County Sheriff's Office* will require that each new hire present such documents as a condition of employment.

The use, possession, or being under the influence of illegal drugs or alcohol while on County time is prohibited. Pre-employment drug screens are conducted for Safety Sensitive Positions in accordance with the *Lee County Sheriff's Office* Substance Abuse Policy.

For sworn law enforcement positions, the *Lee County Sheriff's Office* requires pre-employment testing that may include a psychological profile, a voice stress test, and/or a physical agility test.

PRE-EMPLOYMENT STATEMENT

I certify that all information supplied in this application, and any attached resume, is true and correct. I understand that, because *Lee County Sheriff's Office* will rely on this application in making its employment decision, any false or misleading information furnished by me regarding this application may result in the rejection of this application or termination if employed by the *Lee County Sheriff's Office*.

In consideration of my employment, I agree to conform to the rules and regulations of the *Lee County Sheriff's Office*, and further agree that my employment and compensation are at the will of the *Lee County Sheriff's Office* and can be terminated at any time at the option of either the *Lee County Sheriff's Office* or myself. I further understand that neither the policies, rules, regulations of employment or anything said during the interview process shall be deemed to constitute the terms of an implied employment contract.

I certify that the above statements have been read by me and that the statements I have made on this application are true and correct.

X Signature: _____ **Date:** _____

RELEASE

I hereby authorize all educational institutions which I have attended, all branches of U.S. military service in which I have served, all of my former employers, all corporations, companies, persons, law enforcement agencies, all credit bureaus, all court systems, and all of their representatives to furnish to the *Lee County Sheriff's Office* or its representatives any and all information concerning my education, military service, former employment, credit history, and/or criminal convictions. In addition, I hereby agree to hold harmless and to release all of said institutions, services, employers, bureaus, courts, and representatives from any and all claims that I may have, or which may arise against any and/or all of them including *Lee County Sheriff's Office* and department personnel who are conducting this investigation as a result of their furnishing information to the *Lee County Sheriff's Office*. I further authorize the procurement of an investigative consumer report and understand that such a report may contain information about my background, character, and personal reputation and that further information may be available upon written request within a reasonable period of time. I understand this will also apply to any future update reports that may be requested in the event that I am hired with the *Lee County Sheriff's Office*.

X Signature: _____ **Date:** _____

For background verification purposes please provide:

Drivers' License Number: _____

State of Issue: _____ Expiration: ___/___/___

THIS APPLICATION IS CURRENT FOR AS LONG AS THE POSITION IN WHICH YOU ARE APPLYING IS OPEN. ONCE THIS POSITION HAS BEEN FILLED, IF YOU WISH FURTHER CONSIDERATION FOR AN OPEN POSITION, IT WILL BE NECESSARY TO SUBMIT A NEW APPLICATION.